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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.			33808F0764
First In	ventor	Clau	ude Grison, et al.
Title	ALKOXYS PREPAR OF OLEF	OITA	CYCLOALKANES, PROCESS FOR THEIR N AND THEIR USE FOR THE POLYMERIZATION

(Only for ne	ew nonprovisional applica	tions under 37 C.F.R. 1.	53(b)) E	xpress Mail L	abel No.				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.					ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450				
1. F (S 2. A S 3. S (P - 1)	ee Transmittal Form (submit an original and a dupling pplicant claims small are 37 CFR 1.27. pecification pecification arrangement september of the Inverses Reference to Relat Statement Regarding Ference to Relatement Regarding Ference Relatement Regarding Ference Relatement Regarding Ference Relatement Relatement Relatement Relatement Relatement Relatem	e.g., PTO/SB/17) cate for fee processing) entity status. [Total Pages t forth below) ention ed Applications d sponsored R & D	Alexandria VA 22313-1450 CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) lectide and/or Amino Acid Sequence Submission oplicable, all necessary) Computer Readable Form (CRF) lectification Sequence Listing on: CD-ROM or CD-R (2 copies); or paper Statements verifying identity of above copies						
(Reference to sequence li or a computer program lis	sting appendix			c. Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS				
-1 -1 -1	Background of the Invent Brief Summary of the Inv Brief Description of the D Detailed Description Claim(s) Abstract of the Disclosure	ention rawings (if filed)		9.	10. 37 C.F.R. 3.73(b) Statement Power of (when there is an assignee) Attorney				
4. □ D	rawing(s) (<i>35 U.S.C.1</i>	13) [Total Sheets		12. 🖾	•	n Disclosure	☐ Copies of IDS		
5. Oath or I	_	[Total Sheets				(IDS)/PTO-144	9 Citations		
	Newly executed (orig				 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) 				
b. 🛚	Copy from a prior app	•		14.	(Should be specifically itemized)				
: [_'	visional with Box 18 c	отрівіва)	15. 🗌	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)				
 i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 					16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35				
6. App	or its equivalent.								
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. 09 / 768,162 Prior application information: Examiner Margaret G. Moore Art Unit: 1712 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
19. CORRESPONDENCE ADDRESS									
☑ Customer Number or Bar Code Label (insert Customer No. or Attach, bar code label here)									
Name	Smith, Gambrell & Russell								
1850 M Street, N.W.									
Address	Suite 800						·		
City	Washington		State	DC		Zip Code	20036		
Country	USA	Teleph	one _/	(202) 263-	4300	Fax	(202) 263-4329		
Name (Pr	int/Type) Fred	erick F. Celvetti	11	Registalit	No. (Attor	mey/Agent)	28,557		
Signature Date July 15, 2003									

This collection of information is required by 37 CFR 1.3(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT 750

Complete if Known					
Application Number	To Be Assigned				
Filing Date	Herewith				
First Named Inventor	Claude Grison, et al.				
Examiner Name	To Be Assigned				
Art Unit	To Be Assigned				
Attorney Docket No.	33808F0764				

State Credit Card Order	METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)					
Deposit Account						3. ADDITIONAL FEES					
Deposit Account Number 102-4300 1051 130 1051 130 1051 130 1051 130 1051 130 1051 130 1051 130 1051 130 1051 130 1051 130 1051 130 1052 130 1052 130 1052 130 1052 130 1052 130 1052 130 1053 130 1						Entity	Small 6	ntity			
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Account Name	Number	<u></u>			1052	50	2052	25			
Name					1053	130	1053	130	Non-English specification		
The Director is authorized to: (check all that apply)			·		1812	2,520	1812	2,520	For filing a request for reexamination		
Charge fee(s) indicated below		uthorized to: (c	i check all that apply)		1804	920*	1804	920*			
1	Charge fee(s) i	ndicated below	□ Credit any overpayments	า	1805	1,840*	1805	1,840*			
Second S					1251	110	2251	55	Extension for reply within first month		
1. BASIC FILING FEE Large Entity Small Entity	to the above-ident				1252	410	2252	205			
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Fee	Large Entity	Small Entity			1254	1,450	2254	725	Extension for reply within fourth		
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Claims Substitute Claims C	2. EXTRA CLAIM FEES					470	2502	235	Design issue fee		
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1205 18 2205 9 Reissue claims in excess or 20 and over original patent Other fee (specify)	1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent				Other fee (specify)						
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**or number previously paid, if greater; For Reissues, see above	**or number previously paid, if greater; For Reissues, see above								(4) 0	J	

SUBMITTED BY		/ _				omplete (if applicable)	
Name (Print/Type)	Frederic	Calvetti	Registration (Septettofres)/Agent)	28,557	Telephone	(202) 263-4300	
Signature	1/1		MV [/] OXIXII		Date	July 15, 2003	- 1

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